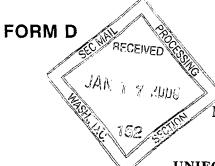
1351179



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response. 16.00



Name of Offering (check if this is an amendment and	name has changed, and indicate change.)	-
Filing Under (Check box(es) that apply): Rule 504 Type of Filing: New Filing Amendment	Rule 505 Rule 506 Section 4(6)	ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and na	ame has changed, and indicate change.)	
Spring Village Retirement, LLC		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3723 Fairview Industrial Drive, SE, Suite 270	Salem, OR 97302	(503) 375-9016
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		N
Ownership of land		(\ PROCESSED
<u> </u>	ership, already formed	olease specify): JAN 3 0 2006
Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-		THOMSON FINANCIAL TOTO

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ✓ Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Harder, Jon, M. Business or Residence Address (Number and Street, City, State, Zip Code) Salem, OR 97302 3723 Fairview Drive, SE Beneficial Owner Executive Officer Director Check Box(es) that Apply: ✓ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Fisher, Darryl Business or Residence Address (Number and Street, City, State, Zip Code) 3723 Fairview Drive, SE Salem, OR 97302 Beneficial Owner Executive Officer Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director Promoter General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

10g 80					B. In	FORMATI	ON ABOU	T OFFERI	NG				
1	Has the	issuer sold	or does th	ne issuer ir	itend to sel	l to non-a	coredited is	avestors in	thic offeri	na?		Yes	No
••	Answer also in Appendix, Column 2, if filing under ULOE.									X			
2.	2. What is the minimum investment that will be accepted from any individual?								s_100	s_100,000.00			
3.	Does the	offering p	permit joint	ownershi	p of a sing	le unit?						Yes	No X
4.	lf a perso or states	ion or simi on to be list list the na	lar remuner ted is an ass	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	ers in conne er or deale (5) persor	ction with rregistered is to be list	sales of sec I with the S ed are asso	curities in th EC and/or	irectly, any ne offering. with a state ons of such		
		ast name fises, LLC	first, if indi	vidual)									
			Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
c/o	Karen Gr	innell, 610	7 SW Mu	rray Blvd.		• .							
Nai	me of Ass	ociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						······································
	(Check '	'All States	" or check	individual	States)	•••••••	•••••						l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS QR WY	MO PA PR
	-	ast name :	first, if indi Inc.	ividual)						,			
			Address (N Suite 100,				Zip Code)						
			oker or Dea								<u></u>		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	'All States	" or check	individual	States)	•••••••		••••				☐ AI	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS ØR WY	ID MO PA PR
	•	ast name	first, if indi	ividual)									
			Address (N			•	Zip Code)						
			nue, Suite oker or De		verton, Or	97008							
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	'All States	" or check	individual	States)	,		******************************			•••••	☐ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS QR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests		
	Other (Specify undivided fractional interest in real property		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	11	\$ <u>1,910,239.00</u>
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)	11	\$_1,910,239.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	W. W. W. W. W.	\$
	Regulation A		\$
	Rule 504	4	\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 25,000.00
	Accounting Fees		\$
	Engineering Fees		§ 1,000.00
	Sales Commissions (specify finders' fees separately)		\$ 114,614.34
	Other Expenses (identify)	<u></u>	\$
	Total	[27]	s 140.614.34

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF I	'RO	CEEDS	112
	b. Enter the difference between the aggregate offerir and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross			\$1,769,624.66
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross			
			D	ayments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		□\$		\$ 140,614.34
	Purchase of real estate		_		_
	Purchase, rental or leasing and installation of mach				
	and equipment		S		\$
	Construction or leasing of plant buildings and facil	lities	□ \$.		\$
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	□ ¢		П\$
	Repayment of indebtedness		_		_
			_		_
	Working capital		_		_
	Other (specify):		□ >		□ 2
			□ \$		
	Column Totals		Z] \$	100,000.00	☑ \$ <u>1,810,239.0</u> 0
	Total Payments Listed (column totals added)			✓ \$ <u>1,9</u>	910,239.00
		D. FEDERAL SIGNATURE			
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	nish to the U.S. Securities and Exchange Commi	ssior	n, upon writter	
Iss	uer (Print or Type)	Signature	Date		
Sp	oring Village Retirement, LLC			1.9.06	>
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			
Jor	M. Harder	Manager of Spring Village Retirement, LLC			

- ATTENTION ---

TAT		

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and know duly authorized person.	vs the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned
Issuer (Print or Type)	Signature Date
Spring Village Retirement, LLC	1.9.06
Name (Print or Type)	Title (Print or Type)
Jon M. Harder	Manager of Spring Village Retirement, LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	913	11.1		- AP	PENDIX				
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and chased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR						•			
CA		×	undivided	3	\$607,000.00				×
СО									
СТ									
DE									
DC									
FL									
GA								<u> </u>	
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA	······								
ME									
MD									
MA									
MI									
MN									
MS									

1975			rs en en	APP	ENDIX				1.5
1	Intend to non-a investor	d to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ				·					
NM									
NY									
NC									
ND									
ОН									
ОК									
OR			The state of the s						
PA									
RI									
SC			Accountage of the control of the con						
SD			- Control of the Cont						
TN			A consequence of the consequence						
TX									
UT			The state of the s						
VT									
VA			The state of the s						
WA		×	undivided fractional interest	2	\$600,000.00				×
WV									
WI			The state of the s						

				APPI	ENDIX		1.00		
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									